

Fill in this information to identify your case:

United States Bankruptcy Court for the:
Northern District of Illinois

Case number (if known): _____ Chapter you are filing under:
 Chapter 7
 Chapter 11
 Chapter 12
 Chapter 13

Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, “Do you own a car,” the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself

| | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
|---|--|---|
| 1. Your full name | <p>Write the name that is on your government-issued picture identification (for example, your driver's license or passport).</p> <p>SUSAN First name</p> <p>Middle name</p> <p>RAMOS HERNANDEZ Last name</p> <p>Suffix (Sr., Jr., II, III)</p> | <p>First name</p> <p>Middle name</p> <p>Last name</p> <p>Suffix (Sr., Jr., II, III)</p> |
| 2. All other names you have used in the last 8 years | <p>Include your married or maiden names.</p> <p>First name</p> <p>Middle name</p> <p>Last name</p> <p>First name</p> <p>Middle name</p> <p>Last name</p> | <p>First name</p> <p>Middle name</p> <p>Last name</p> <p>First name</p> <p>Middle name</p> <p>Last name</p> |
| 3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | <p>xxx - xx - <u>4</u> <u>5</u> <u>0</u> <u>2</u></p> <p>OR</p> <p>9 xx - xx - _____</p> | <p>xxx - xx - _____</p> <p>OR</p> <p>9 xx - xx - _____</p> |

Debtor 1

SUSAN RAMOS HERNANDEZ

First Name Middle Name

Last Name

Case number (if known)

About Debtor 1:

4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years

Include trade names and doing business as names

I have not used any business names or EINs.

Business name _____

Business name _____

EIN _____

EIN _____

About Debtor 2 (Spouse Only in a Joint Case):

I have not used any business names or EINs.

Business name _____

Business name _____

EIN _____

EIN _____

5. Where you live

17537 GREEN BAY AVENUE

Number Street

LANSING IL 60438
City State ZIP Code

COOK
County

If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.

Number Street

P.O. Box

City State ZIP Code

If Debtor 2 lives at a different address:

Number Street

City State ZIP Code

County

If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.

Number Street

P.O. Box

City State ZIP Code

6. Why you are choosing this district to file for bankruptcy

Check one:

- Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
- I have another reason. Explain.
(See 28 U.S.C. § 1408.)

Check one:

- Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
- I have another reason. Explain.
(See 28 U.S.C. § 1408.)

Debtor 1 SUSAN RAMOS HERNANDEZ

First Name

Middle Name

Last Name

Case number (if known)

Part 2: Tell the Court About Your Bankruptcy Case

7. The chapter of the Bankruptcy Code you are choosing to file under

Check one. (For a brief description of each, see *Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy* (Form 2010)). Also, go to the top of page 1 and check the appropriate box.

- Chapter 7
 Chapter 11
 Chapter 12
 Chapter 13

8. How you will pay the fee

I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.

I need to pay the fee in installments. If you choose this option, sign and attach the *Application for Individuals to Pay The Filing Fee in Installments* (Official Form 103A).

I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the *Application to Have the Chapter 7 Filing Fee Waived* (Official Form 103B) and file it with your petition.

9. Have you filed for bankruptcy within the last 8 years?

No

Yes. District _____ When _____ Case number _____
MM / DD / YYYY

District _____ When _____ Case number _____
MM / DD / YYYY

District _____ When _____ Case number _____
MM / DD / YYYY

10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?

No

Yes. Debtor _____ Relationship to you _____
District _____ When _____ Case number, if known _____
MM / DD / YYYY

Debtor _____ Relationship to you _____
District _____ When _____ Case number, if known _____
MM / DD / YYYY

11. Do you rent your residence?

No. Go to line 12.

Yes. Has your landlord obtained an eviction judgment against you and do you want to stay in your residence?

No. Go to line 12.

Yes. Fill out *Initial Statement About an Eviction Judgment Against You* (Form 101A) and file it with this bankruptcy petition.

Debtor 1

SUSAN RAMOS HERNANDEZ

First Name Middle Name

Last Name

Case number (*if known*)

Part 3: Report About Any Businesses You Own as a Sole Proprietor

12. Are you a sole proprietor of any full- or part-time business?

No. Go to Part 4.

Yes. Name and location of business

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

Name of business, if any

Number Street

City _____

State _____

ZIP Code _____

Check the appropriate box to describe your business:

- Health Care Business (as defined in 11 U.S.C. § 101(27A))
- Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
- Stockbroker (as defined in 11 U.S.C. § 101(53A))
- Commodity Broker (as defined in 11 U.S.C. § 101(6))
- None of the above

13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?

For a definition of *small business debtor*, see 11 U.S.C. § 101(51D).

If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).

No. I am not filing under Chapter 11.

No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.

Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.

Part 4: Report If You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

No

Yes. What is the hazard? _____

If immediate attention is needed, why is it needed? _____

Where is the property?

Number Street

City _____

State _____

ZIP Code _____

Debtor 1

SUSAN RAMOS HERNANDEZ

First Name Middle Name

Last Name

Case number (*if known*)

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

- I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

- I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

- I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

- I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

- I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

- I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

- I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

- I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1

Susan Ramos Konstanley

First Name

Middle Name

Last Name

Case number (if known) _____

Part 6: Answer These Questions for Reporting Purposes

16. What kind of debts do you have?

16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

- No. Go to line 16b.
 Yes. Go to line 17.

16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.

- No. Go to line 16c.
 Yes. Go to line 17.

16c. State the type of debts you owe that are not consumer debts or business debts.

17. Are you filing under Chapter 7?

- No. I am not filing under Chapter 7. Go to line 18.

Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?

- Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?
 No
 Yes

18. How many creditors do you estimate that you owe?

- 1-49
 50-99
 100-199
 200-999

- 1,000-5,000
 5,001-10,000
 10,001-25,000

- 25,001-50,000
 50,001-100,000
 More than 100,000

19. How much do you estimate your assets to be worth?

- \$0-\$50,000
 \$50,001-\$100,000
 \$100,001-\$500,000
 \$500,001-\$1 million

- \$1,000,001-\$10 million
 \$10,000,001-\$50 million
 \$50,000,001-\$100 million
 \$100,000,001-\$500 million

- \$500,000,001-\$1 billion
 \$1,000,000,001-\$10 billion
 \$10,000,000,001-\$50 billion
 More than \$50 billion

20. How much do you estimate your liabilities to be?

- \$0-\$50,000
 \$50,001-\$100,000
 \$100,001-\$500,000
 \$500,001-\$1 million

- \$1,000,001-\$10 million
 \$10,000,001-\$50 million
 \$50,000,001-\$100 million
 \$100,000,001-\$500 million

- \$500,000,001-\$1 billion
 \$1,000,000,001-\$10 billion
 \$10,000,000,001-\$50 billion
 More than \$50 billion

Part 7: Sign Below

For you

I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.
18 U.S.C. §§ 152, 1341, 1519, and 3671.

Susan Ramos Konstanley

Signature of Debtor 1

Executed on

01/24/2018
MM / DD / YYYY

X

Signature of Debtor 2

Executed on

MM / DD / YYYY

Debtor 1

SUSAN RAMOS HERNANDEZ

First Name Middle Name

Last Name

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/S/ JOHN HADERLEIN, ESQ.

Signature of Attorney for Debtor

Date

01/26/2018

MM / DD / YYYY

JOHN HADERLEIN, ESQ.

Printed name

JOHN HADERLEIN, ESQ.

Firm name

815-C COUNTRY CLUB DRIVE

Number Street

LIBERTYVILLE

City

IL

State

60048

ZIP Code

Contact phone (312) 316-4614

Email address john@bklaw1.com

6197623

Bar number

IL

State

| | | |
|---|-------------|-----------|
| Fill in this information to identify your case: | | |
| Debtor 1 SUSAN RAMOS HERNANDEZ | | |
| First Name | Middle Name | Last Name |
| Debtor 2 (Spouse, if filing) First Name Middle Name Last Name | | |
| United States Bankruptcy Court for the: Northern District of Illinois | | |
| Case number (if known) | | |

Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Part 1: Summarize Your Assets

| | | Your assets Value of what you own |
|-----|---|--------------------------------------|
| 1. | Schedule A/B: Property (Official Form 106A/B) | \$ 80,000.00 |
| 1a. | Copy line 55, Total real estate, from Schedule A/B..... | \$ 80,000.00 |
| 1b. | Copy line 62, Total personal property, from Schedule A/B..... | \$ 3,600.00 |
| 1c. | Copy line 63, Total of all property on Schedule A/B | \$ 83,600.00 |

Part 2: Summarize Your Liabilities

| | | Your liabilities Amount you owe |
|-----|--|---|
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) | \$ 101,878.00 |
| 2a. | Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ 101,878.00 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) | \$ 0.00 |
| 3a. | Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F..... | \$ 0.00 |
| 3b. | Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | + \$ 10,308.74 |
| | | Your total liabilities \$ 112,186.74 |

Part 3: Summarize Your Income and Expenses

| | | |
|----|--|-------------|
| 4. | Schedule I: Your Income (Official Form 106I) | \$ 2,872.10 |
| | Copy your combined monthly income from line 12 of Schedule I | |
| 5. | Schedule J: Your Expenses (Official Form 106J) | \$ 2,868.00 |
| | Copy your monthly expenses from line 22c of Schedule J | |

Debtor 1 **SUSAN RAMOS HERNANDEZ**
First Name Middle Name Last Name

Case number (if known) _____

Part 4: Answer These Questions for Administrative and Statistical Records

6. Are you filing for bankruptcy under Chapters 7, 11, or 13?

- No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
 Yes

7. What kind of debt do you have?

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
 Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

\$ 4,268.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

Total claim

From Part 4 on Schedule E/F, copy the following:

9a. Domestic support obligations (Copy line 6a.) \$ 0.00

9b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$ 0.00

9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$ 0.00

9d. Student loans. (Copy line 6f.) \$ 0.00

9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) \$ 0.00

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) + \$ 0.00

9g. Total. Add lines 9a through 9f. \$ 0.00

Fill in this information to identify your case and this filing:

| | | |
|---|-----------------------|-------------|
| Debtor 1 | SUSAN RAMOS HERNANDEZ | |
| | First Name | Middle Name |
| Debtor 2 (Spouse, if filing) | Last Name | |
| United States Bankruptcy Court for the: Northern District of Illinois | | |
| Case number | | |

Check if this is an amended filing

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

No. Go to Part 2.

Yes. Where is the property?

1.1. 17537 GREEN BAY AVENUE

Street address, if available, or other description

LANSING IL 60438
City State ZIP Code

COOK

County

What is the property? Check all that apply.

- Single-family home
- Duplex or multi-unit building
- Condominium or cooperative
- Manufactured or mobile home
- Land
- Investment property
- Timeshare
- Other _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? Current value of the portion you own?

\$ 80,000.00 \$ 79,469.00

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

FEE SIMPLE

Check if this is community property (see instructions)

If you own or have more than one, list here:

1.2. Street address, if available, or other description

City State ZIP Code

County

What is the property? Check all that apply.

- Single-family home
- Duplex or multi-unit building
- Condominium or cooperative
- Manufactured or mobile home
- Land
- Investment property
- Timeshare
- Other _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? Current value of the portion you own?

\$ _____ \$ _____

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Check if this is community property (see instructions)

Other Information you wish to add about this item, such as local property identification number: _____

Debtor 1

SUSAN RAMOS HERNANDEZ

First Name

Middle Name

Last Name

Case number (if known)

1.3.

Street address, if available, or other description

What is the property? Check all that apply.

- Single-family home
- Duplex or multi-unit building
- Condominium or cooperative
- Manufactured or mobile home
- Land
- Investment property
- Timeshare
- Other _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property?

\$ _____

\$ _____

Current value of the portion you own?

City _____ State _____ ZIP Code _____

County _____

Who has an interest in the property? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another _____

Check if this is community property (see instructions)

Other information you wish to add about this item, such as local property identification number: _____

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here. → \$ _____

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

- No
- Yes

3.1. Make: 2012

Model: CHEV

Year: CAPTIVA

Approximate mileage: 100,000

Other information:

FINANCED WITH CHASE

Who has an interest in the property? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property?

\$ 4,173.00

\$ 0.00

Current value of the portion you own?

If you own or have more than one, describe here:

3.2. Make: 2014

Model: CHEV

Year: SONIC

Approximate mileage: 50,000

Other information:

FIN WITH REGIONAL ACCE

Who has an interest in the property? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property?

\$ 3,841.00

\$ 0.00

Current value of the portion you own?

Debtor 1

SUSAN RAMOS HERNANDEZ

First Name

Middle Name

Last Name

Case number (if known) _____

3.3. Make: _____

Model: _____

Year: _____

Approximate mileage: _____

Other information:
_____**Who has an interest in the property? Check one.**

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? Current value of the portion you own?

\$ _____ \$ _____

3.4. Make: _____

Model: _____

Year: _____

Approximate mileage: _____

Other information:
_____**Who has an interest in the property? Check one.**

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? Current value of the portion you own?

\$ _____ \$ _____

4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories

Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

 No Yes

4.1. Make: _____

Model: _____

Year: _____

Other information:
_____**Who has an interest in the property? Check one.**

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? Current value of the portion you own?

\$ _____ \$ _____

If you own or have more than one, list here:

4.2. Make: _____

Model: _____

Year: _____

Other information:
_____**Who has an interest in the property? Check one.**

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? Current value of the portion you own?

\$ _____ \$ _____

5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here _____

\$ _____

Debtor 1

SUSAN RAMOS HERNANDEZ

First Name

Middle Name

Last Name

Case number (if known) _____

Part 3: Describe Your Personal and Household Items**Do you own or have any legal or equitable interest in any of the following items?****Current value of the portion you own?**

Do not deduct secured claims or exemptions.

6. Household goods and furnishings*Examples:* Major appliances, furniture, linens, china, kitchenware No Yes. Describe.....

FURNITURE

\$ 1,000.00

7. Electronics*Examples:* Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games No Yes. Describe.....

TV

\$ 500.00

8. Collectibles of value*Examples:* Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No Yes. Describe.....

\$ _____

9. Equipment for sports and hobbies*Examples:* Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe.....

\$ _____

10. Firearms*Examples:* Pistols, rifles, shotguns, ammunition, and related equipment No Yes. Describe.....

\$ _____

11. Clothes*Examples:* Everyday clothes, furs, leather coats, designer wear, shoes, accessories No Yes. Describe.....

CLOTHES

\$ 1,000.00

12. Jewelry*Examples:* Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe.....

\$ _____

13. Non-farm animals*Examples:* Dogs, cats, birds, horses No Yes. Describe.....

\$ _____

14. Any other personal and household items you did not already list, including any health aids you did not list No Yes. Give specific information.....

\$ _____

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here →

\$ 2,500.00

Debtor 1

SUSAN RAMOS HERNANDEZ

First Name

Middle Name

Last Name

Case number (if known) _____

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?

Do not deduct secured claims or exemptions.

16. Cash

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

No

Yes

Cash: \$ 100.00

17. Deposits of money

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

No

Yes

Institution name:

| | | |
|--------------------------------|---------|-------------|
| 17.1. Checking account: | US BANK | \$ 1,000.00 |
| 17.2. Checking account: | | \$ |
| 17.3. Savings account: | | \$ |
| 17.4. Savings account: | | \$ |
| 17.5. Certificates of deposit: | | \$ |
| 17.6. Other financial account: | | \$ |
| 17.7. Other financial account: | | \$ |
| 17.8. Other financial account: | | \$ |
| 17.9. Other financial account: | | \$ |

18. Bonds, mutual funds, or publicly traded stocks

Examples: Bond funds, investment accounts with brokerage firms, money market accounts

No

Yes

Institution or issuer name:

| | |
|-------|----------|
| | \$ |
| | \$ |
| | \$ |

19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture

No

Yes. Give specific information about them.....

Name of entity:

% of ownership:

0% %

\$

0% %

\$

0% %

\$

Debtor 1 **SUSAN RAMOS HERNANDEZ**
First Name Middle Name Last Name

Case number (if known) _____

20. Government and corporate bonds and other negotiable and non-negotiable instruments

Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders.
Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.

No

Yes. Give specific information about them.....

Issuer name:

\$ _____
\$ _____
\$ _____

21. Retirement or pension accounts

Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

No

Yes. List each account separately.

Type of account: Institution name:

401(k) or similar plan: _____ \$ _____
Pension plan: _____ \$ _____
IRA: _____ \$ _____
Retirement account: _____ \$ _____
Keogh: _____ \$ _____
Additional account: _____ \$ _____
Additional account: _____ \$ _____

22. Security deposits and prepayments

Your share of all unused deposits you have made so that you may continue service or use from a company
Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

No

Yes

Institution name or individual:

Electric: _____ \$ _____
Gas: _____ \$ _____
Heating oil: _____ \$ _____
Security deposit on rental unit: _____ \$ _____
Prepaid rent: _____ \$ _____
Telephone: _____ \$ _____
Water: _____ \$ _____
Rented furniture: _____ \$ _____
Other: _____ \$ _____

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)

No

Yes Issuer name and description:

_____ \$ _____
_____ \$ _____
_____ \$ _____

Debtor 1 SUSAN RAMOS HERNANDEZ

First Name Middle Name

Last Name

Case number (if known) _____

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

No

Yes Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c):

| | |
|-------|----------|
| _____ | \$ _____ |
| _____ | \$ _____ |
| _____ | \$ _____ |

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

No

Yes. Give specific information about them....

| | |
|-------|----------|
| _____ | \$ _____ |
|-------|----------|

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

No

Yes. Give specific information about them....

| | |
|-------|----------|
| _____ | \$ _____ |
|-------|----------|

27. Licenses, franchises, and other general intangibles

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

No

Yes. Give specific information about them....

| | |
|-------|----------|
| _____ | \$ _____ |
|-------|----------|

Money or property owed to you?

**Current value of the portion you own?
Do not deduct secured claims or exemptions.**

28. Tax refunds owed to you

No

Yes. Give specific information about them, including whether you already filed the returns and the tax years.

| |
|-------|
| _____ |
|-------|

Federal: \$ _____
State: \$ _____
Local: \$ _____

29. Family support

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

No

Yes. Give specific information.....

| |
|-------|
| _____ |
|-------|

Alimony: \$ _____
Maintenance: \$ _____
Support: \$ _____
Divorce settlement: \$ _____
Property settlement: \$ _____

30. Other amounts someone owes you

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

No

Yes. Give specific information.....

| | |
|-------|----------|
| _____ | \$ _____ |
|-------|----------|

Debtor 1

SUSAN RAMOS HERNANDEZ

First Name

Middle Name

Last Name

Case number (if known) _____

31. Interests in insurance policies*Examples:* Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No Yes. Name the insurance company
of each policy and list its value. ...

Company name:

Beneficiary:

Surrender or refund value:

| | | | |
|-------|-------|-------|----------|
| _____ | _____ | _____ | \$ _____ |
| _____ | _____ | _____ | \$ _____ |
| _____ | _____ | _____ | \$ _____ |

32. Any interest in property that is due you from someone who has died

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

 No Yes. Give specific information.....

| | |
|-------|----------|
| _____ | \$ _____ |
|-------|----------|

33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment*Examples:* Accidents, employment disputes, insurance claims, or rights to sue No Yes. Describe each claim.

| | |
|-------|----------|
| _____ | \$ _____ |
|-------|----------|

34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims No Yes. Describe each claim.

| | |
|-------|----------|
| _____ | \$ _____ |
|-------|----------|

35. Any financial assets you did not already list No Yes. Give specific information.....

| | |
|-------|----------|
| _____ | \$ _____ |
|-------|----------|

**36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached
for Part 4. Write that number here ➔**

| | |
|-------|----------|
| _____ | \$ _____ |
|-------|----------|

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.**37. Do you own or have any legal or equitable interest in any business-related property?** No. Go to Part 6. Yes. Go to line 38.

**Current value of the
portion you own?**
Do not deduct secured claims
or exemptions.

38. Accounts receivable or commissions you already earned No Yes. Describe.....

| | |
|-------|----------|
| _____ | \$ _____ |
|-------|----------|

39. Office equipment, furnishings, and supplies*Examples:* Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices No Yes. Describe.....

| | |
|-------|----------|
| _____ | \$ _____ |
|-------|----------|

Debtor 1

SUSAN RAMOS HERNANDEZ

First Name

Middle Name

Last Name

Case number (if known)

40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade No Yes. Describe.....

| | |
|--|----------|
| | \$ _____ |
|--|----------|

41. Inventory No Yes. Describe.....

| | |
|--|----------|
| | \$ _____ |
|--|----------|

42. Interests in partnerships or joint ventures No Yes. Describe..... Name of entity:

% of ownership:

| | | |
|-------|---------|----------|
| _____ | % _____ | \$ _____ |
| _____ | % _____ | \$ _____ |
| _____ | % _____ | \$ _____ |

43. Customer lists, mailing lists, or other compilations No Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? No Yes. Describe.....

| | |
|--|----------|
| | \$ _____ |
|--|----------|

44. Any business-related property you did not already list No Yes. Give specific information

| | | |
|-------|----------|----------|
| _____ | \$ _____ | \$ _____ |
| _____ | \$ _____ | \$ _____ |
| _____ | \$ _____ | \$ _____ |
| _____ | \$ _____ | \$ _____ |
| _____ | \$ _____ | \$ _____ |

45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here →

| | |
|--|----------|
| | \$ _____ |
|--|----------|

Part 6:**Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.**
If you own or have an interest in farmland, list it in Part 1.**46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?**

- No. Go to Part 7.
 Yes. Go to line 47.

Current value of the portion you own?

Do not deduct secured claims or exemptions.

47. Farm animals

Examples: Livestock, poultry, farm-raised fish

 No Yes.....

| | |
|--|----------|
| | \$ _____ |
|--|----------|

Debtor 1

SUSAN RAMOS HERNANDEZ

First Name

Middle Name

Last Name

Case number (if known) _____

48. Crops—either growing or harvested No Yes. Give specific information.....

\$

49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade No Yes.....

\$

50. Farm and fishing supplies, chemicals, and feed No Yes.....

\$

51. Any farm- and commercial fishing-related property you did not already list No Yes. Give specific information.....

\$

52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here → \$ 1,100.00**Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above****53. Do you have other property of any kind you did not already list?**

Examples: Season tickets, country club membership

 No Yes. Give specific information.....\$
\$
\$**54. Add the dollar value of all of your entries from Part 7. Write that number here** → \$ 0.00**Part 8: List the Totals of Each Part of this Form**

55. Part 1: Total real estate, line 2 → \$ 80,000.00

56. Part 2: Total vehicles, line 5 \$ 0.00

57. Part 3: Total personal and household items, line 15 \$ 2,500.00

58. Part 4: Total financial assets, line 36 \$ 1,100.00

59. Part 5: Total business-related property, line 45 \$ 0.00

60. Part 6: Total farm- and fishing-related property, line 52 \$ 0.00

61. Part 7: Total other property not listed, line 54 + \$ 0.00

62. Total personal property. Add lines 56 through 61. \$ 83,600.00 Copy personal property total → + \$ 83,600.00

63. Total of all property on Schedule A/B. Add line 55 + line 62.

\$ 83,600.00

Fill in this information to identify your case:

| | | |
|---|-----------------------|-------------|
| Debtor 1 | SUSAN RAMOS HERNANDEZ | |
| | First Name | Middle Name |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name |
| United States Bankruptcy Court for the: Northern District of Illinois | | |
| Case number (if known) | | |

Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amount of the exemption you claim | Specific laws that allow exemption |
|---|--------------------------------------|--|------------------------------------|
| | Copy the value from Schedule A/B | Check only one box for each exemption. | |
| Brief description: <u>2012 CHEV CAPTIV</u> | \$ <u>0.00</u> | <input checked="" type="checkbox"/> \$ <u>2,400.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(c) |
| Line from Schedule A/B: <u>3.1</u> | | | |
| Brief description: <u>FURNITURE</u> | \$ <u>1,000.00</u> | <input checked="" type="checkbox"/> \$ <u>1,000.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) |
| Line from Schedule A/B: <u>6</u> | | | |
| Brief description: <u>TV</u> | \$ <u>500.00</u> | <input checked="" type="checkbox"/> \$ <u>500.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) |
| Line from Schedule A/B: <u>7</u> | | | |

3. Are you claiming a homestead exemption of more than \$155,675?

(Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment.)

- No
 Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
 No
 Yes

Debtor 1

SUSAN RAMOS HERNANDEZ

First Name Middle Name Last Name

Case number (if known)

Part 2: Additional Page

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own Copy the value from Schedule A/B | Amount of the exemption you claim Check only one box for each exemption | Specific laws that allow exemption |
|---|--|---|------------------------------------|
| Brief description: <u>CLOTHES</u> | \$ <u>1,000.00</u> | <input checked="" type="checkbox"/> \$ <u>1,000.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) |
| Line from Schedule A/B: <u>11</u> | | | |
| Brief description: <u>CASH</u> | \$ <u>100.00</u> | <input checked="" type="checkbox"/> \$ <u>100.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) |
| Line from Schedule A/B: <u>16</u> | | | |
| Brief description: <u>US BANK CHECKIN</u> | \$ <u>1,000.00</u> | <input checked="" type="checkbox"/> \$ <u>1,000.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) |
| Line from Schedule A/B: <u>17.1</u> | | | |
| Brief description: <u>HOUSE</u> | \$ <u>80,000.00</u> | <input checked="" type="checkbox"/> \$ <u>15,000.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-901 |
| Line from Schedule A/B: <u>1.1</u> | | | |
| Brief description: | \$ _____ | <input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | |
| Line from Schedule A/B: | | | |
| Brief description: | \$ _____ | <input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | |
| Line from Schedule A/B: | | | |
| Brief description: | \$ _____ | <input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | |
| Line from Schedule A/B: | | | |
| Brief description: | \$ _____ | <input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | |
| Line from Schedule A/B: | | | |
| Brief description: | \$ _____ | <input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | |
| Line from Schedule A/B: | | | |
| Brief description: | \$ _____ | <input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | |
| Line from Schedule A/B: | | | |
| Brief description: | \$ _____ | <input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | |
| Line from Schedule A/B: | | | |
| Brief description: | \$ _____ | <input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | |
| Line from Schedule A/B: | | | |
| Brief description: | \$ _____ | <input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | |
| Line from Schedule A/B: | | | |

Fill in this information to identify your case:

| | | |
|---|-----------------------|-------------|
| Debtor 1 | SUSAN RAMOS HERNANDEZ | |
| | First Name | Middle Name |
| Debtor 2 (Spouse, if filing) | Last Name | |
| United States Bankruptcy Court for the: Northern District of Illinois | | |
| Case number (if known) | | |

Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

- No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 Yes. Fill in all of the information below.

Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

2.1 PENNYMAC LOAN SVCS. Describe the property that secures the claim: \$ 79,469.00 \$ 80,000.00 \$ 0.00

Creditor's Name
6101 CONDOR DRIVE
Number Street

17537 GREEN BAY AVE., LANSING, IL

Column A
Amount of claim
Do not deduct the value of collateral.

Column B
Value of collateral that supports this claim

Column C
Unsecured portion if any

As of the date you file, the claim is: Check all that apply.
 Contingent
 Unliquidated
 Disputed

Who owes the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim relates to a community debt

Date debt was incurred _____

Nature of lien. Check all that apply.

- An agreement you made (such as mortgage or secured car loan)
 Statutory lien (such as tax lien, mechanic's lien)
 Judgment lien from a lawsuit
 Other (including a right to offset) _____

Last 4 digits of account number 4 5 0 2

2.2 CHASE Describe the property that secures the claim: \$ 5,637.00 \$ 4,173.00 \$ 0.00

Creditor's Name
270 PARK AVENUE
Number Street

2012 CHEV CAPTIVA

As of the date you file, the claim is: Check all that apply.
 Contingent
 Unliquidated
 Disputed

Who owes the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim relates to a community debt

Date debt was incurred 03/01/2021

Nature of lien. Check all that apply.

- An agreement you made (such as mortgage or secured car loan)
 Statutory lien (such as tax lien, mechanic's lien)
 Judgment lien from a lawsuit
 Other (including a right to offset) _____

Last 4 digits of account number 4 5 0 2

Add the dollar value of your entries in Column A on this page. Write that number here: \$ 85,106.00

Debtor 1

SUSAN RAMOS HERNANDEZ

First Name Middle Name

Last Name

Case number (if known)

Additional Page

Part 1: After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.

| 2.3 REGIONAL ACCEPTANCE | Describe the property that secures the claim: | Column A Amount of claim Do not deduct the value of collateral | Column B Value of collateral that supports this claim | Column C Unsecured portion If any |
|---|---|---|--|--|
| Creditor's Name 765 ELA RD. Number Street | 2014 CHEV SONIC | \$ 16,772.00 | \$ 3,841.00 | \$ 0.00 |

LAKE ZURICH IL 60047
City State ZIP Code

Who owes the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim relates to a community debt

Date debt was incurred 04/01/2021

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Nature of lien. Check all that apply.

- An agreement you made (such as mortgage or secured car loan)
- Statutory lien (such as tax lien, mechanic's lien)
- Judgment lien from a lawsuit
- Other (including a right to offset) _____

Last 4 digits of account number 4 5 0 2

Creditor's Name

Number Street

City State ZIP Code

Who owes the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim relates to a community debt

Date debt was incurred _____

Describe the property that secures the claim: \$ _____ \$ _____ \$ _____

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Nature of lien. Check all that apply.

- An agreement you made (such as mortgage or secured car loan)
- Statutory lien (such as tax lien, mechanic's lien)
- Judgment lien from a lawsuit
- Other (including a right to offset) _____

Last 4 digits of account number _____

Creditor's Name

Number Street

City State ZIP Code

Who owes the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim relates to a community debt

Date debt was incurred _____

Describe the property that secures the claim: \$ _____ \$ _____ \$ _____

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Nature of lien. Check all that apply.

- An agreement you made (such as mortgage or secured car loan)
- Statutory lien (such as tax lien, mechanic's lien)
- Judgment lien from a lawsuit
- Other (including a right to offset) _____

Last 4 digits of account number _____

Add the dollar value of your entries in Column A on this page. Write that number here: \$ 16,772.00

If this is the last page of your form, add the dollar value totals from all pages.
Write that number here: \$ 101,878.00

Debtor 1

SUSAN RAMOS HERNANDEZ

First Name Middle Name

Last Name

Case number (if known) _____

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

2.3 MCCALLA RAYMER LEIBERT PIERCE, LLC

Name _____

1 NORTH DEARBORN

Number Street

SUITE 1200

CHICAGO

IL 60602

City

State ZIP Code

Name _____

Number Street

City

State ZIP Code

On which line in Part 1 did you enter the creditor? 2.1

Last 4 digits of account number 6 5 1 5

On which line in Part 1 did you enter the creditor? _____

Last 4 digits of account number _____

On which line in Part 1 did you enter the creditor? _____

Last 4 digits of account number _____

On which line in Part 1 did you enter the creditor? _____

Last 4 digits of account number 4 5 0 2

On which line in Part 1 did you enter the creditor? _____

Last 4 digits of account number _____

On which line in Part 1 did you enter the creditor? _____

Last 4 digits of account number _____

Fill in this information to identify your case:

| | | |
|---|-----------------------|-------------|
| Debtor 1 | SUSAN RAMOS HERNANDEZ | |
| First Name | Middle Name | Last Name |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name |
| United States Bankruptcy Court for the: Northern District of Illinois | | |
| Case number (if known) | | |

Check if this is an amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims against you?

No. Go to Part 2.
 Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

| Total claim | Priority amount | Nonpriority amount |
|-------------|-----------------|--------------------|
|-------------|-----------------|--------------------|

2.1

Priority Creditor's Name _____ Last 4 digits of account number _____ \$ _____ \$ _____ \$ _____

Number Street _____

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Type of PRIORITY unsecured claim:

Domestic support obligations
 Taxes and certain other debts you owe the government
 Claims for death or personal injury while you were intoxicated
 Other. Specify _____

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

2.2

Priority Creditor's Name _____ Last 4 digits of account number _____ \$ _____ \$ _____ \$ _____

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Type of PRIORITY unsecured claim:

Domestic support obligations
 Taxes and certain other debts you owe the government
 Claims for death or personal injury while you were intoxicated
 Other. Specify _____

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Debtor 1

SUSAN RAMOS HERNANDEZ Document

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Case number (if known) _____

Part 1: Your PRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.

| Total claim | Priority amount | Nonpriority amount |
|-------------|-----------------|--------------------|
|-------------|-----------------|--------------------|

| | | | | |
|---|--|----|----|----|
| Priority Creditor's Name | Last 4 digits of account number | \$ | \$ | \$ |
| Number Street | When was the debt incurred? | | | |
| City State ZIP Code | As of the date you file, the claim is: Check all that apply. | | | |
| <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed | | | | |
| Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt | | | | |
| Type of PRIORITY unsecured claim: <input type="checkbox"/> Domestic support obligations <input type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify _____ | | | | |
| Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes | | | | |
| Priority Creditor's Name | Last 4 digits of account number | \$ | \$ | \$ |
| Number Street | When was the debt incurred? | | | |
| City State ZIP Code | As of the date you file, the claim is: Check all that apply. | | | |
| <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed | | | | |
| Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt | | | | |
| Type of PRIORITY unsecured claim: <input type="checkbox"/> Domestic support obligations <input type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify _____ | | | | |
| Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes | | | | |
| Priority Creditor's Name | Last 4 digits of account number | \$ | \$ | \$ |
| Number Street | When was the debt incurred? | | | |
| City State ZIP Code | As of the date you file, the claim is: Check all that apply. | | | |
| <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed | | | | |
| Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt | | | | |
| Type of PRIORITY unsecured claim: <input type="checkbox"/> Domestic support obligations <input type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify _____ | | | | |
| Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes | | | | |

Part 2: List All of Your NONPRIORITY Unsecured Claims**3. Do any creditors have nonpriority unsecured claims against you?**

- No. You have nothing to report in this part. Submit this form to the court with your other schedules.
 Yes

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

4.1 **IC SYSTEM INC.**
 Nonpriority Creditor's Name
444 HWY 96 E
 Number Street
ST. PAUL **MN** **55127**
 City State ZIP Code

Last 4 digits of account number 4 5 0 2**Total claim** \$ 2,508.00When was the debt incurred? 10/01/2014

As of the date you file, the claim is: Check all that apply.

- Who incurred the debt? Check one.
 Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

- No
 Yes

- Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify PHONE/ATT UVERSE

4.2 **ATT UVERSE**
 Nonpriority Creditor's Name
208 S. AKARD
 Number Street
DALLAS **TX** **75202**
 City State ZIP Code

Last 4 digits of account number 4 5 0 2 \$ 2,508.00When was the debt incurred? 10/01/2014

As of the date you file, the claim is: Check all that apply.

- Who incurred the debt? Check one.
 Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

- No
 Yes

- Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify PHONE

4.3 **SYNCHRONY**
 Nonpriority Creditor's Name
170 West Election Road, SUITE 125
 Number Street
DRAPER **UT** **84020**
 City State ZIP Code

Last 4 digits of account number 4 5 0 2\$ 1,133.00When was the debt incurred? 07/01/2014

As of the date you file, the claim is: Check all that apply.

- Who incurred the debt? Check one.
 Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

- No
 Yes

- Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify CREDIT CARD

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim**4.4****COMCAST**

Nonpriority Creditor's Name

1701 JFK BLVD.

Number Street
PHILADELPHIA PA 19103
City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

- No
 Yes

Last 4 digits of account number 4 5 0 2\$ 195.00When was the debt incurred? 08/01/2014

As of the date you file, the claim is: Check all that apply.

- Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify CABLE TV

4.5**SYNCHRONY BANK/CARE CREDIT**

Nonpriority Creditor's Name

170 West Election Road, SUITE 125

Number Street
DRAPER UT 84020
City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

- No
 Yes

Last 4 digits of account number 4 5 0 2\$ 0.00When was the debt incurred? 01/01/2016

As of the date you file, the claim is: Check all that apply.

- Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify MEDICAL DEBT

4.6**US BANK HOGAN LOC.**

Nonpriority Creditor's Name

800 NICOLLET MALL

Number Street
MINNEAPOLIS MN
City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

- No
 Yes

Last 4 digits of account number 4 5 0 2\$ 503.00When was the debt incurred? 02/01/2013

As of the date you file, the claim is: Check all that apply.

- Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify CREDIT CARD

Debtor 1 SUSAN RAMOS HERNANDEZ Document _____

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Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

| | | | | | |
|---|--|--|---|--|--------------------|
| 4.6 | BANK OF AMERICA Nonpriority Creditor's Name <u>100 NORTH TRYON STREET</u> Number Street <u>CHARLOTTE</u> State <u>NC</u> ZIP Code <u>28255</u> City | | | Last 4 digits of account number <u>4 5 0 2</u> | \$ <u>1,580.37</u> |
| | | | When was the debt incurred? <u>01/01/2011</u> | | |
| As of the date you file, the claim is: Check all that apply. | | | | | |
| <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed | | | | | |
| Type of NONPRIORITY unsecured claim: | | | | | |
| <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>CREDIT CARD</u> | | | | | |
| Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt | | | | | |
| Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | | | | | |
| 4.7 | FIA CARD SERVICES Nonpriority Creditor's Name <u>1100 NORTH KING STREET</u> Number Street <u>WILMINGTON</u> State <u>DE</u> ZIP Code <u>19884</u> City | | | Last 4 digits of account number <u>4 5 0 2</u> | \$ <u>1,580.37</u> |
| | | | When was the debt incurred? <u>01/01/2011</u> | | |
| As of the date you file, the claim is: Check all that apply. | | | | | |
| <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed | | | | | |
| Type of NONPRIORITY unsecured claim: | | | | | |
| <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>CREDIT CARD</u> | | | | | |
| Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt | | | | | |
| Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | | | | | |
| 4.8 | RISE Nonpriority Creditor's Name <u>4150 INTERNATIONAL PLAZA, SUITE 300</u> Number Street <u>FORT WORTH</u> State <u>TX</u> ZIP Code <u>76109</u> City | | | Last 4 digits of account number <u>4 5 0 2</u> | \$ <u>301.00</u> |
| | | | When was the debt incurred? <u>06/21/2016</u> | | |
| As of the date you file, the claim is: Check all that apply. | | | | | |
| <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed | | | | | |
| Type of NONPRIORITY unsecured claim: | | | | | |
| <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>CREDIT CARD</u> | | | | | |
| Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt | | | | | |
| Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | | | | | |

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

CAVALRY PORTFOLIO

Name _____

5000 SUMMIT LAKE DRIVE

Number Street _____

SUITE 400

VALHALLA NY 10595

City State ZIP Code _____

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.3 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 4 5 0 2

CONVERGENT OUTSOURCING

Name _____

800 SW 39th St.

Number Street _____

RENTON WA 98057

City State ZIP Code _____

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.4 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 4 5 0 2

ARS

Name _____

201 W GRAND AVE

Number Street _____

On which entry in Part 1 or Part 2 did you list the original creditor?

Line ____ of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 4 5 0 2

ESCONDIDO

CA 92025

City State ZIP Code _____

On which entry in Part 1 or Part 2 did you list the original creditor?

Line ____ of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

ESCONDIDO

CA 92025

City State ZIP Code _____

On which entry in Part 1 or Part 2 did you list the original creditor?

Line ____ of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

ESCONDIDO

CA 92025

City State ZIP Code _____

On which entry in Part 1 or Part 2 did you list the original creditor?

Line ____ of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

ESCONDIDO

CA 92025

City State ZIP Code _____

On which entry in Part 1 or Part 2 did you list the original creditor?

Line ____ of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

ESCONDIDO

CA 92025

City State ZIP Code _____

Debtor 1

SUSAN RAMOS HERNANDEZ

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Case number (if known) _____

Part 4:**Add the Amounts for Each Type of Unsecured Claim**

- 6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159.**
Add the amounts for each type of unsecured claim.

| Total claim | | |
|--|--|---------------------|
| Total claims from Part 1 | 6a. Domestic support obligations | 6a. \$ _____ 0.00 |
| | 6b. Taxes and certain other debts you owe the government | 6b. \$ _____ 0.00 |
| | 6c. Claims for death or personal injury while you were intoxicated | 6c. \$ _____ 0.00 |
| | 6d. Other. Add all other priority unsecured claims. Write that amount here. | 6d. + \$ _____ 0.00 |
| 6e. Total. Add lines 6a through 6d. | | |
| | 6e. \$ _____ 0.00 | |

| Total claim | | |
|---------------------------------|---|---------------------------|
| Total claims from Part 2 | 6f. Student loans | 6f. \$ _____ 0.00 |
| | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. \$ _____ 0.00 |
| | 6h. Debts to pension or profit-sharing plans, and other similar debts | 6h. \$ _____ 0.00 |
| | 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. + \$ <u>10,308.74</u> |
| | 6j. Total. Add lines 6f through 6i. | |
| | 6j. \$ <u>10,308.74</u> | |